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PATEN IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent No. 6,840,632 Issued: January 11, 2005 Atty Dkt: SHYU3008/BEU Serial No: 10/651,990 Inventor: Jyh-Horng SHYU

3:1. 20 TH

Title: PROJECTION OPTICAL SYSTEM HAVING A WEDGE PRISM

REQUEST FOR REFUND OF PETITION FEE

COMMISSIONER OF PATENTS

Director of the U.S. Patent and Trademark Office P.O. Box 1450 Alexandria, VA. 22313-1450

Sir:

The petition fee of \$110, for the above-identified patent was paid on September 7, 2004 along with the response filed. However, our deposit account shows a withdrawal from the Patent Office of \$110 for the petition fee on September 13, 2004.

Therefore a refund of the petition fee of \$110 is requested and that it be deposited in our Deposit Account No. 02-0200.

Date: January 19, 2005

BACON & THOMAS 625 Slaters Lane, Fourth Floor Alexandria, Virginia 22314 Phone: (703) 683-0500

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Respectfully submitted, BACON & THOMAS, PLLC

Benjamin E. Urcia Registration No. 33,805

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

JYH-HORNG SHYU ET AL. IN RE APPLICATION OF: GROUP ART UNIT: 2851 SERIAL NO.: 10/651,990 EXAMINER: W. Dowling FILED: September 2, 2003 ATTY. REFERENCE: SHYU3008/beu FOR: Projection Optical System Having A Wedge Form COMMISSIONER OF PATENTS P.O. Box 1450 Alexandria, VA 22313-1450 Sir: Transmitted herewith is a communication/amendment in the above-identified application. Small entity status under 37 CFR 1.9 and 1.27 is claimed. No additional fee is required. The fee, if any, has been calculated as shown below: Highest Number Number of Full Fee Extra Claims **Small Entity** Claims After **Previously Paid** Fee Basis For Amendment ×\$18= × \$ 9 = Total Claims × \$ 86 = × \$ 43 = Independent Claims + \$290 = + \$145 = ☐ First Presentation of Proper Multiple Dependent Claim **TOTAL** 3 If less than 0 enter 0. 2 If less than 3 enter 3. 1 If less than 20 enter 20. . A duplicate copy of this sheet is Please charge my Deposit Account Number 02-0200 in the amount of _\$ attached. is attached. A check in the amount of _\$_ ☐ The Commissioner is hereby authorized to charge any additional fees associated with this communication, including fees due under 37 CFR 1.16 and 37 CFR 1.17 or credit any overpayment to Deposit Account Number 02-0200. A duplicate copy of this sheet is attached. Also enclosed is/are: Petition for a One-Month Extension of Time; Check for \$110.00 Respectfully submitted, 23364 Customer Number Phone: (703) 683-0500

Benjamin E. Urcia
Attorner for Applicant

September 7, 2004

DATE: